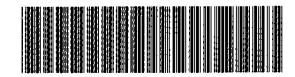
L08000059343

| (Requestor's Name) | | | | |
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| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | y/State/Zip/Phone | e #) | | |
| PICK-UP | WAIT | MAIL | | |
| (Bu | siness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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T. HAMPTON

DEC - 8 2010

EXAMINER

COVER LETTER

| TO: | Registration Se Division of Cor | | ' | | |
|----------|------------------------------------|--|--|---|--|
| SUBJE | CT: | PF N | aples LLC | | |
| | | | ed Liability Company | | |
| The end | closed Articles of | Amendment and fee(s) are subn | nitted for filing. | | |
| Please 1 | eturn all correspo | ondence concerning this matter t | o the following: | | |
| | | | Joseph J Brodigan | | |
| | | | Name of Person | | |
| | | B | Brodigan & Gardiner | | |
| | | | Firm/Company | | |
| | | | 40 Broad Street | | |
| | | | Address | - | |
| | | | Boston, Ma 02109 | | |
| | | | City/State and Zip Code | | |
| | | Jbrodig | ganjr@brodiganlaw.com | tion | |
| For furt | her information c | oncerning this matter, please ca | -71/6 s / tel(t) | CO. T. | |
| | Jose | eph Brodigan | at (617) 6 1 5 | | |
| | | f Person | Area Code & Daytime 7 | | |
| Enclose | ed is a check for the | ne following amount: | | | |
| \$25. | .00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed | |
| | Registr Divisio P.O. Bo | The figure | - STREET/COURIEI Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230 | ions er Circle | |

ARTICLES OF AMENDMENT TO SECRETARY OF STATE ARTICLES OF ORGANIZATION OF 10 DEC -7 PM 1:80

| (<u>Name of the Limited Liabil</u> (A Florid | PF Naples LLC lity Company as it now appears a Limited Liability Company) | on our records.) | |
|--|---|--|--|
| The Articles of Organization for this Limited Liability Florida document number Lo8000059343 | Company were filed on | Ture 16, 2008 and assigned | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the li | mited liability company here | ¥. | |
| The new name must be distinguishable and end with the v "L.L.C." | words "Limited Liability Compar | ny," the designation "LLC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | | |
| (Principal office address MUST BE A STREET ADD | DRESS) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| B. If amending the registered agent and/or reg registered agent and/or the new registered office ac | • | ur records, <u>enter the name of the new</u> | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | r _{us} . | er Florida street address | |
| · | | | |
| | City | , Florida Zip Code | |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Legistered Agent

Page 1 of 2

If mending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-----------------------------------|---|---|
| MGR | Donato F. Pizzuti | 14911 Celle Way Naples, FL 34110 | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| D. If amen | ding any other information, enter | change(s) here: (Attach additional sheets, if necessary.) | SECKETARY OF S SICKETARY OF S SICKETARY OF S SICKETARY OF S |
| _ | | | RATIONS 1:08 |
| Dated | December 2 | 2010 | |
| | Signature of all | nember or authorized representative of a member | |
| | Signature of arti | Joseph Brodigan | |
| | - | Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00